



CITY OF TUCSON
OFFICE OF THE CITY CLERK
CAMPAIGN FINANCE ADMINISTRATION REPORT
RECEIPT



Primary Election – August 25, 2015
 General Election – November 3, 2015

CITY OF TUCSON
 RECEIVED

NAME OF COMMITTEE FILING REPORT

15 NOV 25 P1:43

For Green Party of Pima County
 (Name of Political Committee)
 for _____ who is a candidate for the office
 (Name of Candidate, when applicable)
 of _____ Political Party _____ ID # 90-094-CT

OR

CANDIDATE \$500 THRESHOLD EXEMPTION STATEMENT

for _____
 (Name of Candidate)
 who is a Candidate for the Office of _____
 Political Party _____ ID# _____

- ☐ Political Committee Statement of Organization # _____ ☐ Original or
☐ Request for Public Matching Funds Contract# _____ (PMF Candidates Only) ☐ Amended

CAMPAIGN FINANCE REPORT:

- ☐ a. Statement Establishing Eligibility – **PMF Candidates Only**
☐ b. Consolidated City/State Campaign Finance Report (Filed on or before February 2, 2015)
☐ c. Consolidated City/State Campaign Finance Report (Filed on or before June 30, 2015)
☐ d. Consolidated City/State Pre – Primary Report (Filed on or before August 21, 2015)
☐ e. City Post – Primary Report (Filed on or before September 4, 2015) – **PMF Candidates Only**
☐ f. State Post – Primary Election Report (Filed on or before September 24, 2015)
☐ g. Consolidated City/State Pre – General Election Report (Filed on or before October 30, 2015)
☐ h. City Post – General Election Report (Filed on or before November 13, 2015) – **PMF Candidates Only**
☒ i. State Post – General Election Report (Filed on or before December 3, 2015)
☐ j. Termination Statement (Filed on or before March 2, 2016) – **PMF Candidates Only**
must include Final report if not previously filed
☐ Political Committee No Activity Statement (Report date of: _____)
☐ Other _____

 Signature Deputy City Clerk

Date: _____

11/25/15



**POLITICAL COMMITTEE
STATE OF ARIZONA
CAMPAIGN FINANCE REPORT**

For Office Use Only
CITY OF TUCSON

1. Green Party of Pima County
Full Name of Committee
P.O. Box 6014
Address
Tucson, AZ 85703 (520) 798-6169
City Zip Code Phone Number
2. _____
Sponsoring Organization and Office

Name of Candidate and Office Sought (if applicable)

E-Mail Address _____ Fax # _____

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3. ID#

OFFICE OF THE
CITY CLERK

4. REPORTING PERIOD (Please check appropriate box)

FILING DEADLINE

- ☐ January 31 Report — For Period of
November 26, 2013 through December 31, 2014 *February 2, 2015
- ☐ June 30 Report — For Period of
January 1, 2015 through May 31, 2015 June 30, 2015
- ☐ Pre-Primary Election Report — For Period of
June 1, 2015 through August 13, 2015 August 21, 2015
- ☐ Post-Primary Election Report — For Period of
August 14, 2015 through September 14, 2015 September 24, 2015
- ☐ Pre-General Election Report — For Period of
September 15, 2015 through October 22, 2015 October 30, 2015
- ☒ Post-General Election Report — For Period of
October 23, 2015 through November 23, 2015 December 3, 2015
- ☐ January 31, 2017 Report — For Period of
November 24, 2015 through December 31, 2016 January 31, 2017

5. SUMMARY	Column A Total This Reporting Period	Column B Election Period To Date
5a Surplus from Previous Campaign (or at time Statement of Organization was filed for the new committee)		\$ 2,456.00
5b Cash on Hand at Beginning of this Reporting Period	\$ 2,456.00	
5c Total Receipts (from corresponding columns on Detailed Summary Page, Line 8)	\$ 359.01	\$ 359.01
5d Subtotal (add Lines [b] and [c] for Column A and add lines [a] and [c] for Column B)	\$ 2,815.21	\$ 2,815.21
6a Total Debts and Obligations from Previous Campaign Committee at beginning of the Election Period (or at time Statement of Organization was filed for the new committee) (Do not add or subtract this line from the other lines)		
6b Total Disbursements (from corresponding columns on Detailed Summary Page, Line 18)	\$ 404.39	\$ 404.39
7. Cash on Hand at Close of Reporting Period (Subtract Line 6b from Line 5d - Column A must equal Column B)	\$ 2,410.82	\$ 2,410.82

DETAILED SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

1. Committee Name Green Party of Pima County 3. ID# 90-044-LT
 2. Report Covering Period From 10/23/15 Thru 11/23/15

RECEIPTS		COLUMN A THIS PERIOD	COLUMN B CAMPAIGN TO DATE
4. Contributions other than loans and in-kind:			
(a) Individuals - more than \$50 (Total from Schedule A)		\$ 45.00	\$ 45.00
(b) Individuals - aggregate \$50 or less (Total from Schedule A-1)			
(c) Political Committees (Total from Schedule B)			
(d) Subtotal Contributions [add 4(a), 4(b) and 4(c)]			
(e) Refund of Contributions (Total from Schedule F-2)			
(f) Total contributions Other than Loans and In-kind [subtract 4(e) from 4(d)]			
5. (a) Loans made or guaranteed by candidate (Total from Schedule C)			
(b) All other loans (Total from Schedule C-1)			
(c) Total loans [add 5(a) and 5(b)]			
6. In-kind contributions (Total from Schedule E)		\$ 313.99	\$ 313.99
7. Dividends, interest, and other forms of receipts (Total from Schedule F-1)		\$ 0.02	\$ 0.02
8. TOTAL Receipts [add 4(f), 5(c), 6, and 7]		\$ 359.01	\$ 359.01
DISBURSEMENTS			
9. Expenditures for Operating Expenses (Total from Schedule D)		\$ 90.40	\$ 90.40
10. Independent Expenditures (Total from Schedule D-1)			
11. Value of in-kind expenditures (Total from Schedule E)		\$ 313.99	\$ 313.99
12. Loans made by reporting committee (Total from Schedule D-2)			
13. (a) Repayment of loans made or guaranteed by candidate (Total from Schedule D-4)			
(b) Repayment of all other loans (Total from Schedule D-5)			
(c) Total Loan Repayments [add 13(a) and 13(b)]			
14. Transfers to other political committees (Total from Schedule D-6)			
15. Any other disbursement (Total from Schedule D-7)			
16. Subtotal disbursements [add lines 9, 10, 11, 12, 13(c), 14, and 15]			
17. Rebates, refunds and other offsets to operating expenses (Total from Schedule D-3)			
18. TOTAL disbursements [subtract line 17 from line 16]		\$ 404.39	\$ 404.39
19. Total Outstanding Debts owed by Reporting Candidate or Political Comm. (Schedule F-3)			
20. I certify, under penalty of perjury, that I have examined the contents of this campaign finance report and to the best of my knowledge and belief it is true and complete.			
Type or Print Name of Treasurer <u>Michael E. Cease (Acting Treasurer)</u>			
Signature of Treasurer or Candidate or Designating Individual: <u>Michael E. Cease</u>		Date <u>11/24/15</u>	

CONTRIBUTIONS FROM INDIVIDUALS*
(More than \$50)*

SCHEDULE A

1. Committee Name Green Party of Pima County 3. ID # 90-094-G

2. Report Covering Period from 10/23/15 thru 11/23/15

CONTRIBUTIONS				DATE RECEIVED	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TOTAL THIS CAMPAIGN TO DATE
NAME, ADDRESS, OCCUPATION AND EMPLOYER OF CONTRIBUTOR						
a.	LAST <u>Adger</u>	FIRST <u>Steven</u>	MI <u></u>	10/31/15	\$ 5.00	\$ 5.00
STREET ADDRESS <u>3132 N. Olsen Ave.</u>						
CITY <u>Tucson</u>		STATE <u>AZ</u>	ZIP <u>85719</u>			
OCCUPATION <u>I.T.</u>		EMPLOYER <u>Not specified</u>				
b.	LAST <u>Fry</u>	FIRST <u>Ariel</u>	MI <u></u>	10/31/15	\$ 10.00	\$ 10.00
STREET ADDRESS <u>216 E. 26th St.</u>						
CITY <u>Tucson</u>		STATE <u>AZ</u>	ZIP <u>85701</u>			
OCCUPATION <u>Student</u>		EMPLOYER <u>Not specified</u>				
c.	LAST <u>Pitts</u>	FIRST <u>June</u>	MI <u></u>	10/31/15	\$ 10.00	\$ 10.00
STREET ADDRESS <u>6926 E. Cooper St.</u>						
CITY <u>Tucson</u>		STATE <u>AZ</u>	ZIP <u>85710</u>			
OCCUPATION <u>Counselor</u>		EMPLOYER <u>Not specified</u>				
d.	LAST <u>Porello</u>	FIRST <u>Jeff</u>	MI <u></u>	10/31/15	\$ 10.00	\$ 10.00
STREET ADDRESS <u>407 S. LaCanada Dr., Unit A</u>						
CITY <u>Green Valley</u>		STATE <u>AZ</u>	ZIP <u>85714</u>			
OCCUPATION <u>Retired</u>		EMPLOYER <u>N/A</u>				
e.	LAST <u>Victor Tanny</u>	FIRST <u>Victor</u>	MI <u></u>			
STREET ADDRESS <u>3425 W. Avenida Sombra</u>						
CITY <u>Tucson</u>		STATE <u>AZ</u>	ZIP <u>85746</u>			
OCCUPATION <u>Not specified</u>		EMPLOYER <u>Not specified</u>				
5. ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE A (If last page of Schedule A, transfer total to Detailed Summary Page line 4(a), Column A)					\$ 45.00	

*If contributions of \$50 or less are listed with contributor's name, address, occupation and employer on Schedule A, do not include them on Schedule A-1.

EXPENDITURES FOR OPERATING EXPENSES*

SCHEDULE D

1. Committee Name Green Party of Pima County2. ID# 90-044-CT3. Report Covering Period from: 10/23/15 thru 11/23/15

EXPENDITURES		DATE EXPENDITURE MADE	AMOUNT OF THE EXPENDITURE
NAME AND ADDRESS TO WHOM EXPENDITURE (DISBURSEMENT) WAS MADE			
a.	NAME, ADDRESS, CITY, STATE AND ZIP <u>Pay Pal.com</u>	<u>11/02/15</u>	\$ <u>2.80</u>
	DESCRIPTION OF ITEMS OR SERVICES PURCHASED <u>Donation processing fees</u>	CHECK # <u>Electronic debit</u>	
b.	NAME, ADDRESS, CITY, STATE AND ZIP <u>Phone.com</u>	<u>11/10/15</u>	\$ <u>12.94</u>
	DESCRIPTION OF ITEMS OR SERVICES PURCHASED <u>Telephone answering service</u>	CHECK # <u>Electronic debit</u>	
c.	NAME, ADDRESS, CITY, STATE AND ZIP <u>Wildwind Realty, LLC</u> <u>326 Lee St., #106</u> <u>Oakland, CA 94610</u>	<u>11/13/15</u>	\$ <u>64.00</u>
	DESCRIPTION OF ITEMS OR SERVICES PURCHASED <u>Rental fees - Historic meeting room</u>	CHECK # <u>213</u>	
d.	NAME, ADDRESS, CITY, STATE AND ZIP <u>Chuck Irvin</u> <u>4115 E. North St., #4</u> <u>Tucson, AZ 85712</u>	<u>11/17/15</u>	\$ <u>10.66</u>
	DESCRIPTION OF ITEMS OR SERVICES PURCHASED <u>Re-imbursement - photocopying expenses</u>	CHECK # <u>199</u>	
e.	NAME, ADDRESS, CITY, STATE AND ZIP		
	DESCRIPTION OF ITEMS OR SERVICES PURCHASED	CHECK #	
f.	NAME, ADDRESS, CITY, STATE AND ZIP		
	DESCRIPTION OF ITEMS OR SERVICES PURCHASED	CHECK #	
5.	ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE D [If last page of Schedule D, transfer total to Detailed Summary Page, Line 9, Column A]		\$ <u>90.40</u>

*Expenditures, other than a contract, promise or agreement to make an expenditure resulting in credit.

IN-KIND CONTRIBUTIONS AND EXPENDITURES

SCHEDULE E

1. Committee Name Green Party of Pima County 2. ID # 90-094-CT
3. Report Covering Period from: 10/23/15 thru 11/23/15

IN-KIND CONTRIBUTIONS AND EXPENDITURES		DATE	FAIR MARKET VALUE	
NAME AND ADDRESS OF INDIVIDUAL (OR NAME, ADDRESS AND ID# OF THE POLITICAL COMMITTEE) FROM WHOM RECEIVED OR TO WHOM GIVEN				
a. NAME, ADDRESS, CITY, STATE, ZIP AND ID# Cynthia Duncan 2902 E. Glenn St. Tucson, AZ 85716		10/31/15 \$ 285.00		
CONTRIBUTION <input checked="" type="checkbox"/> EXPENDITURE <input checked="" type="checkbox"/>				
DESCRIPTION Office storage / computer work station				
OCCUPATION Not Specified	EMPLOYER Not Specified			
b. NAME, ADDRESS, CITY, STATE, ZIP AND ID# Mike Cease 2540 E. 8th St. Tucson, AZ 85716		10/31/15 \$ 19.00		
CONTRIBUTION <input checked="" type="checkbox"/> EXPENDITURE <input checked="" type="checkbox"/>				
DESCRIPTION Nation Builder subscription				
OCCUPATION Consultant	EMPLOYER Database Consulting Services			
c. NAME, ADDRESS, CITY, STATE, ZIP AND ID# Ariel Fry 216 E. 20th St. Tucson, AZ 85701		10/31/15 \$ 9.99		
CONTRIBUTION <input checked="" type="checkbox"/> EXPENDITURE <input checked="" type="checkbox"/>				
DESCRIPTION Meetup.com Subscription				
OCCUPATION Student	EMPLOYER N/A			
d. NAME, ADDRESS, CITY, STATE, ZIP AND ID#				
CONTRIBUTION <input type="checkbox"/> EXPENDITURE <input type="checkbox"/>				
DESCRIPTION				
OCCUPATION	EMPLOYER			
5. ENTER TOTAL OF IN-KIND CONTRIBUTIONS ONLY IF LAST PAGE OF SCHEDULE E [If last page of Schedule E, transfer total to Detailed Summary Page, Line 6, Column A]			\$ 313.99	
6. ENTER TOTAL OF IN-KIND EXPENDITURES ONLY IF LAST PAGE OF SCHEDULE E [If last page of Schedule E, transfer total to Detailed Summary Page, Line 11, Column A]			\$ 313.99	

DIVIDENDS, INTEREST AND OTHER RECEIPTS

SCHEDULE F-1

1. Committee Name Green Party of Pima County 2. ID# 90-094-CT
 3. Report Covering Period from: 10/23/15 thru 11/23/15

DIVIDENDS, INTEREST AND OTHER FORMS OF RECEIPTS		DATE RECEIVED	AMOUNT OF THE RECEIPT
4.	NAME AND ADDRESS FROM INDIVIDUAL (OR NAME, ADDRESS AND ID# OF THE POLITICAL COMMITTEE) FROM WHOM RECEIPT WAS RECEIVED		
a.	NAME, ADDRESS, CITY, STATE, ZIP AND ID# <u>HFCU</u> <u>P.O. Box 11900</u> <u>Tucson, AZ 85734</u>	<u>11/01/15</u>	<u>\$ 0.02</u>
	DESCRIPTION OF RECEIPT <u>Dividends</u>		
b.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#		
	DESCRIPTION OF RECEIPT		
c.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#		
	DESCRIPTION OF RECEIPT		
d.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#		
	DESCRIPTION OF RECEIPT		
e.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#		
	DESCRIPTION OF RECEIPT		
f.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#		
	DESCRIPTION OF RECEIPT		
5.	ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE F-1 [If last page of Schedule F-1, transfer total to Detailed Summary Page, Line 7, Column A]		<u>\$ 0.02</u>